CERTIFICATE OF TERMINATION						
PART I (To be completed by the Military Service)						
TO: The Assistant Commissioner - Comptroller Federal Housing Administration Washington, DC, 20412		FROM: (Military Service)				
This is to advise you that the "period of ownership by servicemen" as defined by the FHA Commissioner on the following loan, has been terminated and that this Service will no longer be responsible for the payment of mortgage insurance premiums under Section 222, National Housing Act, as amended (12 U.S.C. 1715m).						
1. FHA CASE NO. 2. NAME OF SERVICEMAN (Last, First, Middle		e Initial)	3. GRADE	4. SOCIAL SECURITY ACCOUNT NO.		
5A. REASON FOR TERMINATION (Check one) TERMINATION O SALE OF PROPERTY (Complete Part II) OTHER (Explain)		F SERVICE	6. SIGNATURE	AND DATE SIGNED		
5B. DATE OF EVENT CAUSING TERMINATION.						
	PART II - CERTIFICATE (,			
7 LOCATION OF PROPERTY	I CERTIFY that I so	old my real e	estate			
7. LOCATION OF PROPERTY						
8. TO: (Last Name, First Name, Middle Initial)		9. ADDRESS (Include ZIP Code)				
10. NAME OF LENDING INSTITUTION		11. ADDRESS (Include ZIP Code)				
12. I HAVE NOTIFIED THEM OF THE S	SALE THE DATE OF THE SAL	F WAS				
13. THE PURCHASER IS IS IS NO						
If the purchaser is a member of the Ai			v complete the fo	llowing items		
14. SOCIAL SECURITY NUMBER	15. GRADE	_	H OF SERVICE	noving name		
It has been brought to the attention of the purchaser that if he is not a serviceman and if he desires to assume the existing loan, he must immediately arrange to pay in cash a sum not to exceed the mortgage insurance premium for 1 year, and that the monthly pay- ments on the loan will be increased by a sufficient amount to defray subsequent FHA mortgage insurance premiums.						
17. DATE	18. SIGNATURE					
PART III - (To be completed by FHA)						
TO: (Military Service)		FROM: The Assistant Commissioner - Comptroller Federal Housing Administration Washington, DC, 20142				
19. DATE OF TERMINATION OF RESPONSIBILITY FOR MORTGAGE PREMIUMS		20. AMOUNT OF MORTGAGE INSURANCE PREMIUM TO BE REFUNDED. TO BE BILLED. \$				
Receipt is acknowledged of the above notice that your Service will no longer be responsible for the insurance premiums on the above loan. Your responsibility for mortgage insurance premiums has been terminated as of the date shown in item 19. Refund or filling of mortgage insurance premiums as indicated above will be made to your service.						
21. DATE	22. SIGNATURE					
REMARKS						

DATA REQUIRED BY THE PRIVACY ACT OF 1974				
(5 U.S.C. 552a) TITLE OF FORM	PRESCRIPING PIRECTIVE			
Certificate of Termination	PRESCRIBING DIRECTIVE			
1. AUTHORITY				
Section 222, National Housing Act, as amended (12 U.S.C. 1715m) Executive Order 9397, 22 Nov 43 (Social Security Number)				
2. PRINCIPAL PURPOSE(S)				
Initiated by the service member and is used as the document for the member to certify the sale or her Service was paying mortgage insurance premiums, which is turn acts to terminate Service such premiums on the member's behalf.				
3. ROUTINE USES				
a. By the member to certify the sale of property on which the Government is paying mortgage insurance premiums on behalf of the member.				
b. By the Service to notify the FHA that the period of home ownership by the service member has been terminated and to stop payment of mortgage insurance premiums on behalf of the member.				
c. By the FHA to acknowledge termination of Service responsibility for payment of mortgage insurance premiums.				
4. MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION	ON			
Mandatory. If the information is not provided by the member, the Service will continue to pay insurance premiums on his or her behalf and this will usually result in an indebtedness to the Go				